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#14
7/31/03

Atty. Docket No. STE01 P-1069

CERTIFICATE OF MAILING

I hereby certify that this paper, together with all enclosures identified herein, are being deposited with the United States Postal Service as first class mail, addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on the date indicated below.

06/27/03
Date

Catherine M. Updegraff
Catherine M. Updegraff

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 3635
Examiner : B. Stephan
Applicants : Jonathan J. King et al.
Appln. No. : 09/692,663
Filing Date : October 20, 2000
Confirmation No. : 7520
For : PARTITION SYSTEM WITH ELEVATED RACEWAY

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

RECEIVED
JUL 02 2003
GROUP 3600

Dear Sir:

Enclosed is a response to the Office Action dated February 27, 2003. The items checked below are appropriate:

 x Applicants hereby petition for a one month extension of time to respond to the above Office Action. The fee of \$110.00 for the Extension is enclosed.
Any fee for additional claims has been calculated as shown below:

07/01/2003 MGBREM1 00000106 09692663

CLAIMS AS AMENDED

01 FC:1251

110.00 OP

	Col. 1		Col. 2	Col. 3	Small Entity		Other Than A Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total Claims	33	Minus	31	= 2	x \$9	\$ 0.00	x \$ 18	\$ 36.00
Independent Claims	9	Minus	5	= 4	x \$42	\$ 0.00	x \$ 84	\$ 336.00
First Presentation of Multiple Dependent Claims \$140						\$ 0.00	x \$280	\$ 0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$ 0.00		\$ 372.00

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☐ Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted or is enclosed.

☐ No additional fee is required.

☒ A fee of \$372.00 to cover the cost of the additional claims added by this response is enclosed.

☐ A fee of \$_____ to cover _____ is enclosed.

☒ A check for \$110.00 to cover the above fee is enclosed.

☒ Please charge any additional fees or credit overpayment to Deposit Account 16 2463. A duplicate copy of this sheet is attached.

PRICE, HENEVELD, COOPER,
DEWITT & LITTON

Date

6/27/02

Jeff S. Kapteyn

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JSK/cmu